



# **Passenger Handbook**

Dear Community member and potential passenger,

Welcome to the Cycling Without Age (CWA) Napier programme. It is our hope that by using our service you will be able to get outside for a slow fun bike ride, experience some fresh air and sunshine, meet new people and enjoy being out into the community.

This Passenger Handbook outlines our programme guidelines and procedures. When you are ready, please complete and sign the application and the waiver, return them both to us and then you are "good to go."

You will be able to arrange rides by telephone or by email.

We hope you will join us and enjoy feeling the wind in your hair again!

Sincerely,

**Alan** White Trustee, Pilot Trainer and Bookings 0274 302 702

Elizabeth (Liz) Barrett Trustee, Sec/Treasurer/ Administrator 027 244 2576



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# **Cycling Without Age Napier Trust (CWA Napier)**



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# 1.0 Programme Administration

#### 1.1 The CWA Napier programme

CWA Napier is responsible for volunteer pilots' training, record keeping, volunteer recruitment and appreciation. Bookings will be received from you or your carer/facilitator by telephone or email.

#### 1.2 Passengers

Passengers are responsible to complete the passenger application/waiver form and for you or your facilitator/carer to arrange for rides by phone.

# 2.0 Passenger Guidelines

#### 2.1 Passenger Criteria

Volunteer pilots provide **free** recreational trishaw rides and there is absolutely no payment required. Rides are not for appointments or errands; they are purely for recreation.

**Triobike** passengers should be able to get themselves in and out of the Triobike. Volunteers can only lend a hand for support. Any passenger that requires more assistance (but not 'lift in' assistance) must have staff or companion assist them in and out of the Triobike. The Triobike is equipped with a lap seat belt, but not a harness.

Passengers for **JOY**, **our wheelchair trishaw**, remain in their own wheelchair which is then pulled onto JOY in a safe and secure manner by a winch which is an integral part of the trishaw.

All passengers remain in their Trishaw for the duration of the ride.

Passengers who initially meet these conditions but find their condition deteriorates after a time may need to review their suitability for the programme.

#### 3.0 Ride Procedures

#### 3.1 Availability

Passengers can arrange ride times via your facilitator/carer or by calling Alan on 0274 302 702

While CWA Napier will work to ensure that all your requests are met, rides are based on the availability of our volunteer pilots and are weather dependent. Rides may be unavailable at times or cancelled due to inclement weather.

#### 3.2 Companions and Helpers

Passengers may have a helper, companion, family member or friend accompany them on a ride, if they wish and they can ride alongside the trishaw on their own bicycle.

If they join the passenger on the triobike, they must also sign the waiver form before riding.



#### 3.3 Ride Times

Rides including additional stops may be approximately 30-40 minutes initially (or shorter as arranged on an individual basis) and in general will not exceed this length unless prearranged. Rides may be cut short due to weather, trishaw mechanical failure, or at your request.

#### 3.4 Cancelling Your Ride

If you need to cancel your ride, let Alan know with as much notice as possible.

#### 3.5 Seatbelts

Passengers must wear seatbelts at all times while in the Trishaws.

#### 3.6 Helmets and Hats.

Passengers need not wear helmets while on the Trishaw unless they prefer to do so. Pilots are required to wear helmets.

Triobike passengers may find warm hats in winter may reduce any chill notwithstanding the incredibly warm duffel blanket with handwarmers which is supplied on the triobike. In summertime, hats to protect from the sun may be desired.

Passengers on JOY should bring their own blankets, hats and scarves that they would normally use on a wheelchair ride outside.

#### 3.7 Additional Stops

The programme is not intended to be a transportation program. Therefore, stops are not permitted for appointments or errands, however occasional stops along the ride which may include parks, playgrounds, at the lake, or coffee and ice cream shops etc., may occur as appropriate.

#### 3.8 Home Pick Up

Occasionally volunteer pilots may pick up a passenger from another place, if it is within close proximity to where the trishaw resides. Volunteers will not enter a home. It is requested that passengers are ready prior to their pickup time.

#### 3.9 Smoking/Alcohol/Recreational Drugs

Smoking, alcohol and recreational drug use are not permitted by anyone, at any time on the Trishaws. Pilots, at their discretion can refuse rides if they feel the safety of the passenger or themselves is jeopardized.

#### 3.10 Weather

In the case of bad weather, the ride will be cancelled. This is at the discretion of the pilot and passenger. Passengers will be contacted by phone if the ride is cancelled. The Passenger is to contact their carer/facilitator or call Alan at CWA Napier directly, if they wish to cancel due to weather.



#### 3.11 Mechanical Failure, Accidents and Health Events

In the case of a Trishaw mechanical failure during a ride, the Pilot will ensure the passenger's safety is the paramount concern at all times.

If the Trishaw cannot be easily fixed or needs trailering, the Pilot will call the contact number as provided on the application form to arrange a pickup or to make appropriate other arrangements. If the Trishaw is on a path that a vehicle cannot get to, the passenger's ability to walk/ride to an area where transport can reach, will be assessed. The Pilot may call police/ambulance depending on location for assistance and/or as per contact information provided.

The Pilot will call 111 with all health events requiring evaluation and/or assistance or an accident with an injury.

## 3.12 More About JOY - our wheelchair bike

Our wheelchair trishaw has a unique loading platform for easy access for the wheelchair.

The loading ramp tilts which means the wheelchair can be winched onto the platform without the use of additional ramps. The wheelchair is secured into place using motor transport clamping systems and an inertia seatbelt.

Wheelchairs up to a maximum width of 74cm can be transported safely on the cycle. It is fitted with hydraulic disc brakes with a parking feature and wheelchair lock.

#### 4.0 Grievance Procedures

#### 4.1 Pilot Initiated

If a Pilot has any problems during the course of their ride they are asked to contact CWA Napier immediately following the ride with details of the incident. We will work with the Pilot and passenger(s) involved in the incident to ensure a satisfactory resolution. A record of the incident will be placed in the Pilot's and Passenger's file.

#### 4.2 Passenger Initiated

If a Passenger or designate has any problems during the course of their ride, they are asked to contact CWA Napier immediately following their ride with details of the incident. We will work with the Passenger(s) and Pilot to insure a satisfactory resolution. A record of the incident will be placed in the Pilot's and Passenger's file.



# 5.0 Confidentiality

#### A. Principles of Confidentiality

During the course of the ride, a Pilot or Passenger may acquire information that, while voluntarily shared, is privileged information. All Pilots and Passengers will:

- > Be made aware of the principles of confidentiality by which they must abide.
- > Treat all personal information regarding any Passenger/Pilot, whether read, overheard, observed or told directly, as confidential.
- > Treat all information gathered while participating in CWA Napier programme as confidential, not only for the duration of the volunteer's service/use of services, but indefinitely after service is completed.
- > Be aware that sharing information/photos on social media or in the public domain must be mutually consented to.

## **B. Limits of Confidentiality**

Pilots and Passengers will, where appropriate, ensure to the best of their ability that programme users and passengers are made aware of the limits of confidentiality.

#### C. Confidentiality Clause in the Waiver

Pilots and Passengers each sign a Waiver upon entry into the program, which has a confidentiality clause.

#### **D. Your Information**

- > You have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong.
- > If you'd like to ask for a copy of your information, or to have it corrected, please contact Liz at cwa.napiernz@gmail.com or phone 027 244 2576



Passenger Handbook Policies and Procedures End.

Passenger Application and Waiver Form Next.





	Date of App	Date of Application:		
Contact Information				
Name:	Sex: M F	☐ Date	of Birth:	
Address or Facility:				
City:	Postal Code	:		
Emergency Contact:	Phone:			
Relationship:	Email Addre	Email Address:		
Personal Information				
This information is collected to allow CWA N best and safest level of service possible.	lapier to assess a person's suital	bility for the p	orogramme and	to provide the
Please tick the most appropriate:	Completely Mobile 🗌	Cane 🗌	Walker 🗌	Wheelchair
For Triobike Passengers				
Are you able to get into the Triobike unassis	sted?		Yes 🗌	No 🗌
Are you able to sit up unaided?			Yes 🗌	No 🗌
Do you need a companion to ride with you?			Yes 🗌	No 🗆
Are you required to bring supplemental oxy	gen with you?		Yes 🗌	No 🗆
For All Passengers				
<b>DNR</b> : Is there a "NOT FOR RESUSCITATION"	' directive?		Yes 🗌	No 🗌
Do you have any medical conditions that madifficulties, hearing loss, osteoporosis, heart		enger of the C	ัWA Napier Proุ	gramme (vision
ls there anything else that the Volunteer Pilo	ot should be aware of ?			



Passenger Confidentiality and Application Agreement				
Napier have received, read and understand the CWA Napier and I attest that all of the information I have provided is nce into the programme is entirely at the discretion of both				
e CWA Napier programme as a passenger.				
t risks associated with participation in this activity, that my it enough to participate in the activity.				
ding the possibility of personal injury, death, property y, loss may have been contributed to or occasioned by the ficers, directors, employees, members, volunteers, agents,				
The Injury Prevention, Rehabilitation and Compensation				
pier and its coordinators, officers, directors, employees, entatives and successors and any and all business ed activity and each of them, their owners, officers and ow or in the future arising from any loss, accident, injury or cipation of the individual named herein during this event; above that the individual named herein has agreed to				
d had sufficient time to read and understand this waiver. that I understand and agree to the conditions stated in of kin, executors, administrators and successors.				
, 20				
Witness Signature:				

Witness Signature:



Inform	ed Consent – Waiver	of Liability - Legal Guardian/ P	ower of Attorney		
Passenge	r Name (Please Print):				
	ersigned, attest that I am ier Programme as a passe	_	y of the person named herein taking part in the		
>	_	that there are inherent risks associat y and that I am physically fit enough	ed with participation in this activity, that my to participate in the activity.		
>	damage of any kind not	withstanding that the injury, loss may er and its coordinators, officers, direc	possibility of personal injury, death, property have been contributed to or occasioned by the tors, employees, members, volunteers, agents,		
>	➤ I acknowledge that cover may be available under The Injury Prevention, Rehabilitation and Compensation Act 2001.				
>	members, volunteers, a associates and partners employees hereby waiv death which may be cau	gents, assigns, legal representatives a involved in the above noted activity a ing all claims for damage now or in th used by or arise from participation of	s coordinators, officers, directors, employees, and successors and any and all business and each of them, their owners, officers and e future arising from any loss, accident, injury or the individual named herein during this event; t the individual named herein has agreed to		
By signin	g it I agree to the above	conditions and allow the individual r	d understand this informed consent. named herein to participate in the programme. executors, administrators and successors.		
Signed th	is	day of	, 20		
Legal Gua	ardian/Power of Attorney	Name (Please Print):			
Phone: _					
Legal Gua	ardian/Power of Attorney	Signature:			

Witness Name: \_\_\_\_\_